osHpd   Office of Statewide Health Planning and Development

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Healthcare Workforce Clearinghouse

July 23, 2008 Minutes
California Healthcare Workforce Clearinghouse Rancho Cucamonga Focus Group

Meeting Location: Central Park Community Center,
11200 Baseline Road, Rancho Cucamonga, Etiwanda Room

Participants & Organizations Present:

Alisa Arc	Reach Out West End
Ann Bach	Baldy View Regional Occupational Program
Bob Biddle	Campaign for College Opportunity
Charles Davis	Board of Chiropractic Examiners
Chen Wu	Department Workforce Development, San Bernardino County
Cyndi Soraoka	John Muir Health, Concord
Diana Fox	Reach Out West End
Diane Podolske	California State University, San Bernardino
Ellen Bradley	California Department of Managed Health Care
Faiza Solehdin	Health Workforce Programs
Joe Briceno	Employment Development Department -Labor Market Information Division
John Bacheller	Native American Voters Coalition, Costanoan Rumsen Tribe
Julie Hughes-Lederer	Los Angeles County Regional Health Occupations Resource Center
Kevin Fleming	Center for Excellence Program/San Bernardino Community College District
Lee Nattress	Sutter Independent Living Center
Lena Kopelow	Healthcare Workforce Development Program
Linda Reed	Employment Development Department, Rancho Cucamonga
Mariann Ruffolo	Department of Behavioral Health
Mary Knudtson	California State University, Long Beach
Mary O'Connor	Golden West College, Regional Health Occupational Resource Center
Ralph Hernandez	University of California, Los Angeles
Richard Hernandez	Reach Out West End
Ruth Ann Terry	Board of Registered Nursing
Sandy Harmsen	Department Workforce Development, San Bernardino County
Stephanie Congdon	Reach Out West End
Tony Campos	Department Workforce Development, San Bernardino County
William Prouty	Global Economic & Workforce Development Coalition

OSHPD Staff Present: Angela Minniefield, Deborah Holstien, Dorian Rodriguez, Monique Scott, and Felicia Borges

Welcome and opening remarks – Angela Minniefield

The intent of the focus groups is to elicit healthcare workforce and educational information that assists the Office of Statewide Health Planning and Development (OSHPD) in developing a user-friendly, comprehensive and integrated data healthcare clearinghouse infrastructure that meets customer, data hosts and constituent's needs.

OSHPD will work with the Employment Development Department's/Labor Market Information Division (EDD-LMID), state licensing boards, and state higher education entities to collect, analyze, and distribute healthcare workforce information to the extent available by specialty, supply and demand, diversity, ethnicity, race, gender, age, languages spoken, and educational capacity. Ms. Minniefield had participants and OSHPD staff introduce themselves.

Focus Group Overview – Angela Minniefield

Angela Minniefield proceeded to review the agenda and overview of the material packets.
Senate Bill (SB) 139 establishes the Health Care Workforce Clearinghouse Program (Clearinghouse) and directs the OSHPD to design a centralized data collection system which captures healthcare workforce and education data and identifies health workforce trends "to the extent available. The target date for completion of the design, development, and implementation of the data system is June 2011. Periodic reports and updates will be available to the public on OSHPD's website www.oshpd.ca.gov regarding the different phases of the project.

ACTION: Ruth Ann Terry from the Board of Registered Nurses (BRN) requested that OSHPD review the BRN's data collection system and survey instrument for possible replication with other licensing boards. The BRN has been successful in their data collection.

DISCUSSION ITEM: Stimulus Questions

Deborah Holstien, Data Processing Manager for ITSS (Information Technology Systems Services) presented the stimulus questions to the focus group participants. Deborah stated that her role in data management is to assist in the development of the Clearinghouse data design. The Clearinghouse is to store more than just information collected. The intent of the Clearinghouse is to create a standardized data program that is accessible for analysis and reporting data that will inform health workforce program development, planning and policy priorities.

Question 1: How does your organization plan to collect health care workforce and educational data? Is your response critical for Clearinghouse data use?

A. Current supply of health care workers, by specialty

- Identify local issues and community needs
- To justify new class offerings or professions
- To identify current capacity/projected needs
- To determine pipeline activities needed along the education continuum
- Ethnicity, age, diversity, languages spoken
- Number of students enrolled, capacity for students
- Classification levels or sub-grouping
- Identify number of staff and faculty needed
- Ability to ask questions
- Identify current workforce and gaps
- Collect data on entry level positions
- Collect education requirements and degree information
- Identify demand for educational program development
- Identify bottle necks – what can be done with other public programs (ie. CCC's)
- Mesh education and employer needs
- **Note:** Use Department of Labor Standard job classifications; also "specialty" needs to go beyond licensed categories and also include job titles

B. Geographic distribution of health care workers, by specialty

- Ability to aggregate data, by regions
- Ability to analyze data by zipcode, city, state, county and congressional political boundries

- Ability to analyze data by local, state, county, and national data by medically underserved area (MUA) or medical service study area (MSSA)
- Prepare gap analysis
- Identify economic boundaries and urbanization
- Identify funding restrictions for grants and scholarships

C. Diversity of health care workers by specialty (i.e. race, ethnicity, and languages spoke, etc.)

- Include tracking diversity of the healthcare workforce by disability, age, and gender
- Include socio-economic status
- Degree of employment experience – entry, seasoned, retirement
- 1st generation citizens
- Track where born, educated, employed (and how long in each location, reason for leaving, etc.)

D. Current and forecasted demand for health worker, by specialty

- Cross walk various data elements (education/workforce with forecasted population growth to assist with facility building)
- Forecasting retirements by 5 year, 7 year, 10 year, etc.
- Track time at which people move from clinical practice
- Consider staged retirements
- Track hours worked – 20 hours, 40 hours (part-time, full-time)
- What forecasting models work? 1 year, 2 years, etc.
- Track time in clinical practice to another career to determine time of employment stay and why employees are leaving
- Identify additional clinic locations needed
- Track where demand comes from
- Where educated – will health worker stay within community after graduation
- Forecast data needs should be short and long term

E. Education capacity to produce trained, certified and licensed healthcare workers, by specialty

- Identify education requirements up to doctoral level
- Track sub-levels and specialties (i.e. ADN, BSN, MSN, Doctorate)
- Faculty needs - cross training occupations
- Collect data for proprietary, technical schools, adult schools, 4-year private, high schools, 4-year public universities, regional occupations programs (ROP), and community colleges
- Faculty shortages for specific content areas and requirements
- Faculty requirements for Allied Health specialties
- Are stipends available for schools (i.e. mental health professions)
- Are internships available
- Full-time or part-time faculty status
- Diversity of faculty
- Attrition rate data to develop support programs
- Number of health profession programs capacity, by region
- Collect data from hospitals about their ability to clinically place students and identify needs for expanding additional clinical sites
- Wait times for developing new programs (qualified applicants turned down)
- Ability to assess attrition rates and numbers of graduates, by schools

F. Trend analysis and special reporting (ie. labor market information, system gaps, best practices, etc.)

- Identify trend and projections by past, current, and future demands
- Identify salary and wage information over time
- Examine licensing board exam pass rates to determine what, if any, outcomes are related to cultural issues.

G. Policy recommendations/changes to address issues of workforce shortage and distribution

- Inform state level policy for resource allocation
- Use data to determine whether health plans can move into new areas
- Licensure information tied to providing data allocation of resources (state policy making)
- Change clinical requirements and placement, what sites are available for clinical study (LVN)
- Create a Board with oversight to monitor proprietary schools
- Reduce testing and exam barriers related to cultural and linguistic competency
- Promoting the need for a diverse health workforce
- Require standardized definitions

Question 2: What are your recommendations for viewing and accessing the Clearinghouse data? For example, do you prefer customized summary reports generated by using an interactive process on the Internet; information contained on video CDs/DVDs; hard copy library; specialized technologies; staff technical assistance; frequent updates - quarterly, semi-annually, annually; special user group logins; electronic bulleting boards; etc.

- Maintain current data with regular updates
- Social networking component to discuss best practices, questions and answers
- Blogging capability/support networks
- Sample websites with great data access
    - National Healthcare Practitioner Data Bank
    - California Health Interview Survey
    - California Department of Education (CDE)
    - Department of Justice (DOJ) can add GIS data sets
    - Board of Registered Nursing
- Custom analysis of data at a discounted fee
- Easy to use, access, and navigate
- Option to customize reports
- Prepare for 2 types of users: researchers and those seeking canned reports
- Technical assistance capability
- Standard queries
- Geocoding ability
- Ability to import own data set and inlays
- Demographic information
- Standardize reports and report templates
- Ability to download information
- Download into Excel
- Reports linked to GIS/Maps
- Overlays – economic and other parameters
- Pictures/graphics downloadable to Excel
- Download map and data "behind" map
- Use layers for supply and demand
- List Standard Occupation Classification (SOC) codes
- Crosswalk linkages

Question 3. What Clearinghouse issues/challenges do you foresee in collecting data retrieval, sharing and transmission mechanisms (such as, confidentiality/privacy; data validity/inconsistency; management; coordination; survey processes; staff capacity; timeliness, etc?) What are your recommended solutions to these issues/challenges?

- Finding data and is it retrievable
- Timing

- Data validity/accuracy
- Include data methodology
- Metadata – what does the data mean/how is it collected
- Getting a statistically significant number of respondents ("N")
- Give advance notice to providers so that they have time to collect
- Regular forums to discuss data needs
- Tie to licensing
- Ability to look at short and long-term trends
- Margins of error
- Who will respond to inquiries
- Regularity of data updates
- Surveys – how do you get people to respond
- Statistical reporting

Question 4. If the Clearinghouse can accommodate other data needs not identified in the statute, what other data needs/resources would you like OSHPD to consider or elevate to appropriate authorities?

- Data on entry level positions and support staff
- Reimbursement, payment, salary, wages
- Insurance coverage: uninsured, Medi-Cal, private
- Track number of patients in hospitals
- Futuristic projections
- Paradigm changes – multi generational, knowledge base, current versus new workforce, teaching methods
- Soft and hard skills required for providers
- Preparing students for industry
- Standardize model for each organization
- Emerging professions (Medical Laboratory Technician)
- EDD working on career ladders project
- Collect data from high schools on job placement of students after they graduate. (ie. Where can junior high and high school educators get information on health career opportunities?)
- List serve
- Data sharing requirements

Question 5: What questions and/or activities do you recommend we consider for conducting future focus groups and/or special meetings?

- Need a central point of contact to include updates or make suggestions for the Clearinghouse (hwc@oshpd.ca.gov)

Conclusion:

Angela Minniefield thanked the attendees for their participation in the focus group session and she also thanked Diana Fox for scheduling the community center location.

Diana Fox, with Reach Out West End, announced that there would be a K-12 conference in November. The date has not been finalized but she anticipates that the conference might be held on November 6th and 7th or November 13th and 14th. Diana stated that some of the focus group participants may be contacted to be speakers at the conference.

Adjournment: 1:10 p.m.